

Work Order ID 69409

Tuesday, May 10, 2011 3:26:17 PM



Page 1

Item ID: D206-781-173KIV

Accept



Setup Start



Revision ID:

Stop



Item Name: Hat Bin, Litter Compatible-Ivory

Start Date: 5/10/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 5/16/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan:

P

Date: 11-05-10

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

100

0.00



DC

Document Control

Memo

0.00

Photocopy bluefile & type labels per PPP D206-781-173KIV
CHG001*11/5/18*
for CL 11-5-18

110

Pick Kit

0.00



Packaging

Packaging

Memo

0.00

JB *11/05/18*

120

QC4- 100% Inspect kits for completeness

0.00



QC

Quality Control

Memo

0.00

11/5/18

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 69409

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Item ID: D206-781-173KIV

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Setup Start



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Stop



Item Name: Hat Bin, Litter Compatible-Ivory

Start Date: 5/10/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 5/16/2011 Req'd Qty: 1.00



Customer:

Reference:

Run Start



Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Stop



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: _____	0.00							
	Packaging								
Packaging	Memo	0.00							
	<i>NeuA</i>								
140	QC21- Final Inspection - Work Order Release	0.00							
	QC								
Quality Control	Memo	0.00							

*4/12/18**11/5/19**11/1-05-19*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

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Page 1

Work Order ID: 69409

Parent Item: D206-781-173KIV

Parent Item Name: Hat Bin, Litter Compatible-Ivory





Start Date: 5/10/2011

Required Date: 5/16/2011

Start Qty: 1.00

Required Qty: 1.00

Comments:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3824-3KIV 		Manufactured	No			110	Each	0.0000	1	1			
Hat Bin-Ivory												69411	
D3851-1KIV 		Manufactured	No			110	Each	101.0000	6	6	✓		
Doubler-Ivory													JB
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST087		101							
				51798		101							
AN525-10R10 		Purchased	No			110	Each	222.0000	4	4	✓		
Screw													JB 11/05
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST325		222							
				13536		122							
				19356		100							

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries